faith to raise legitimate public health concerns, and for other purposes.

S. 163

At the request of Mr. Marshall, the names of the Senator from North Carolina (Mr. Budd) and the Senator from Alabama (Mrs. Britt) were added as cosponsors of S. 163, a bill to amend the Internal Revenue Code of 1986 to remove short-barreled rifles, short-barreled shotguns, and certain other weapons from the definition of firearms for purposes of the National Firearms Act, and for other purposes.

S. 173

At the request of Mr. Blumenthal, the names of the Senator from Colorado (Mr. Bennet) and the Senator from Colorado (Mr. Hickenlooper) were added as cosponsors of S. 173, a bill to amend chapter 44 of title 18, United States Code, to require the safe storage of firearms, and for other purposes.

S. 184

At the request of Mr. PAUL, the names of the Senator from Tennessee (Mrs. BLACKBURN) and the Senator from Oklahoma (Mr. LANKFORD) were added as cosponsors of S. 184, a bill to amend chapter 8 of title 5, United States Code, to provide that major rules of the executive branch shall have no force or effect unless a joint resolution of approval is enacted into law

S.J. RES. 5

At the request of Mr. COTTON, the name of the Senator from South Carolina (Mr. Graham) was added as a cosponsor of S.J. Res. 5, a joint resolution disapproving the action of the District of Columbia Council in approving the Local Resident Voting Rights Amendment Act of 2022.

S. CON. RES. 2

At the request of Mr. MENENDEZ, the names of the Senator from New Hampshire (Ms. HASSAN) and the Senator from Illinois (Mr. DURBIN) were added as cosponsors of S. Con. Res. 2, a concurrent resolution commending the bravery, courage, and resolve of the women and men of Iran demonstrating in more than 133 cities and risking their safety to speak out against the Iranian regime's human rights abuses.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mrs. FEINSTEIN (for herself, Mr. MENENDEZ, Mr. WHITE-HOUSE, and Mrs. GILLIBRAND):

S. 203. A bill to amend section 923 of title 18, United States Code, to require an electronic, searchable database of the importation, production, shipment, receipt, sale, or other disposition of firearms; to the Committee on the Judiciary.

Mrs. FEINSTEIN. Madam President, today I rise to introduce the Crime Gun Tracing Modernization Act.

This bill would bring ATF into the 21st century by allowing the Agency to electronically search for the records of

guns used in crimes across the country. It is hard to believe that ATF still must store paper records and search them by hand in order to identify the guns used for criminal activity. These archaic rules prevent the people responsible for enforcing our laws from doing their jobs effectively.

The National Tracing Center at ATF is responsible for quickly placing crime gun ownership information into the hands of law enforcement officials so they can solve crimes and save lives. In 2021, National Tracing Center receive over 540,000 trace requests.

Unfortunately, the timely completion of these trace requests has been made nearly impossible because ATF cannot search these records electronically.

To make matters worse, these millions of records are stored in thousands of boxes that are overflowing the hallways of the National Tracing Center in Martinsburg, WV. The records that agents must search through are so massive, ATF has been told that if it places more boxes inside the facility, the floor may collapse.

Every moment after a crime is committed matters dearly to our law enforcement agencies. Prohibiting the efficient search of these records puts our communities at risk.

I thank my former colleague Senator Leahy for championing this bill last Congress. I am committed to continuing the fight for this important fix.

By Mr. THUNE (for himself, Mr. Lankford, Mr. Cotton, Mrs. Hyde-Smith, Mr. Johnson, Mr. Sullivan, Mr. Rubio, Mr. Barrasso, Mr. Risch, Mr. Marshall, and Mr. Moran):

S. 204. A bill to amend title 18, United States Code, to prohibit a health care practitioner from failing to exercise the proper degree of care in the case of a child who survives an abortion or attempted abortion; to the Committee on the Judiciary.

Mr. THUNE. Madam President, later today, I will introduce the Born-Alive Abortion Survivors Protection Act, along with my colleague Senator LANKFORD. It is a simple bill. It simply states that a baby born alive after an attempted abortion is entitled to the same protection and medical care that any other newborn baby is entitled to. And you would think that it would be a simple "yes" vote from every Member of this body, but unfortunately, that is not where we are.

Four years ago and then three years ago, the U.S. Senate took up this bill, and almost every single Democrat in this body voted against it. Just 3 weeks ago, the House of Representatives took up this bill, and almost every single Democrat over there voted against it. Apparently banning infanticide is now controversial because—let's be clear—that is what we are talking about here.

Some Democrats have tried to cloak their opposition to this bill in meaningless phrases about a private decision

between a woman and her doctor, but what is the decision we are talking about? We are talking about whether or not a living baby, born after an attempted abortion, should be provided with medical care or be left to die or, I suppose, be killed outright by the abortionist. That is what we are talking about. That is the "decision" Democrats are referring to. And that is apparently the decision they think should be left up to patients and their doctors—whether or not to let a living, breathing baby die.

The Senate voted on a previous version of this bill introduced by my former colleague Senator Sasse 4 years ago when the Democratic Governor of Virginia came right out and said you could keep a newly born baby comfortable while you decided what to do with it—in other words, while you decided whether to let the child die or, I guess, kill it or whether to let it live. That chilling statement made it abundantly clear that we needed to state explicitly that any baby, wherever he or she is born, including in an abortion clinic, is entitled to medical care. It is staggering that we have gotten to the point where we need to debate this in Congress, staggering that this wouldn't be an automatic "yes" vote from every Member of this body, but that is where we are.

If anyone thinks that abortion isn't a slippery slope, that we can somehow devalue unborn babies' lives while maintaining respect for everyone else's, then I am here to tell them differently because the Democratic Party has gotten to the point where its members not only oppose legislation to protect unborn babies; they oppose legislation to protect born ones as well. In Democrats' world, there are now apparently two classes of born babies: the wanted ones born alive in delivery rooms and the unwanted ones born alive in abortion clinics. Apparently, only one of those classes of babies is entitled to the equal protection of the laws.

Democrats talk a lot about abortion when they are talking about this bill, but this bill, of course, would do absolutely nothing to restrict abortion. It is not a bill protecting unborn babies; it is a bill protecting born babies.

I do understand why Democrats are so worked up, though, because while this bill may not do anything to restrict abortion, there is always the chance that drawing attention to the humanity and dignity of the child who has just been born will draw attention to the humanity and dignity of the child who is about to be born-the child Democrats are determined our laws should not protect. And Democrats are apparently so determined to preserve the so-called right to kill unborn babies that they are fully comfortable opposing a law that would protect born—born—babies.

These are hard things to talk about, but they have to be said because that is the reality of where we are right now.

Roughly 50 percent of the U.S. Congress opposes giving the equal protection of the law to born human beings if they happen to be born alive following an attempted abortion.

Now, I think we are at a real inflection point as to where we want to be as a nation. Do we want to be a country where the circumstances of your birth determine whether or not your right to life is protected? Do we want to be a country that endorses leaving living, breathing babies to die, that discards born babies because they are, for a moment at their birth, unwanted? I don't know. I think we are better than that. We have to be better than that.

If we truly want to be a nation that protects human rights, that stands for justice, that defends the vulnerable, then we cannot be a nation that says it is acceptable to leave living, breathing, born human beings to die in abortion clinics, that says there are two classes of newborn babies and that only one of them deserves to be protected. Every human being deserves to be protected, no matter the circumstances of his or her birth.

I want to thank Senator Lankford for his leadership on this issue. We will be working together to advance this legislation, and I pray that sooner rather than later, we will get to the day when this bill will be an automatic "yes" vote from every Member of this body.

Madam President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 204

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled.

SECTION 1. SHORT TITLE.

This Act may be cited as the "Born-Alive Abortion Survivors Protection Act".

SEC. 2. FINDINGS.

Congress finds the following:

- (1) If an abortion results in the live birth of an infant, the infant is a legal person for all purposes under the laws of the United States, and entitled to all the protections of such laws.
- (2) Any infant born alive after an abortion or within a hospital, clinic, or other facility has the same claim to the protection of the law that would arise for any newborn, or for any person who comes to a hospital, clinic, or other facility for screening and treatment or otherwise becomes a patient within its care.

SEC. 3. BORN-ALIVE INFANTS PROTECTION.

(a) REQUIREMENTS PERTAINING TO BORN-ALIVE ABORTION SURVIVORS.—Chapter 74 of title 18, United States Code, is amended by inserting after section 1531 the following:

"§ 1532. Requirements pertaining to bornalive abortion survivors

- "(a) REQUIREMENTS FOR HEALTH CARE PRACTITIONERS.—In the case of an abortion or attempted abortion that results in a child born alive:
- "(1) DEGREE OF CARE REQUIRED; IMMEDIATE ADMISSION TO A HOSPITAL.—Any health care practitioner present at the time the child is born alive shall—
- "(A) exercise the same degree of professional skill, care, and diligence to preserve

the life and health of the child as a reasonably diligent and conscientious health care practitioner would render to any other child born alive at the same gestational age; and

- "(B) following the exercise of skill, care, and diligence required under subparagraph (A), ensure that the child born alive is immediately transported and admitted to a hospital.
- "(2) MANDATORY REPORTING OF VIOLA-TIONS.—A health care practitioner or any employee of a hospital, a physician's office, or an abortion clinic who has knowledge of a failure to comply with the requirements of paragraph (1) shall immediately report the failure to an appropriate State or Federal law enforcement agency, or to both.
 - "(b) Penalties.—
- "(1) IN GENERAL.—Whoever violates subsection (a) shall be fined under this title, imprisoned for not more than 5 years, or both.
- "(2) INTENTIONAL KILLING OF CHILD BORN ALIVE.—Whoever intentionally performs or attempts to perform an overt act that kills a child born alive described under subsection (a), shall be punished as under section 1111 of this title for intentionally killing or attempting to kill a human being.
- "(c) BAR TO PROSECUTION.—The mother of a child born alive described under subsection (a) may not be prosecuted for a violation of this section, an attempt to violate this section, a conspiracy to violate this section, or an offense under section 3 or 4 of this title based on such a violation.
 - "(d) CIVIL REMEDIES.-
- "(1) CIVIL ACTION BY A WOMAN ON WHOM AN ABORTION IS PERFORMED.—If a child is born alive and there is a violation of subsection (a), the woman upon whom the abortion was performed or attempted may, in a civil action against any person who committed the violation, obtain appropriate relief.
- "(2) APPROPRIATE RELIEF.—Appropriate relief in a civil action under this subsection includes—
- "(A) objectively verifiable money damage for all injuries, psychological and physical, occasioned by the violation of subsection (a);
- "(B) statutory damages equal to 3 times the cost of the abortion or attempted abortion; and
- "(C) punitive damages.
- "(3) ATTORNEY'S FEE FOR PLAINTIFF.—The court shall award a reasonable attorney's fee to a prevailing plaintiff in a civil action under this subsection.
- "(4) ATTORNEY'S FEE FOR DEFENDANT.—If a defendant in a civil action under this subsection prevails and the court finds that the plaintiff's suit was frivolous, the court shall award a reasonable attorney's fee in favor of the defendant against the plaintiff.
- "(e) DEFINITIONS.—In this section the following definitions apply:
- "(1) ABORTION.—The term 'abortion' means the use or prescription of any instrument, medicine, drug, or any other substance or device—
- "(A) to intentionally kill the unborn child of a woman known to be pregnant; or
- "(B) to intentionally terminate the pregnancy of a woman known to be pregnant, with an intention other than—
- "(i) after viability, to produce a live birth and preserve the life and health of the child born alive; or
- "(ii) to remove a dead unborn child.
- "(2) ATTEMPT.—The term 'attempt', with respect to an abortion, means conduct that, under the circumstances as the actor believes them to be, constitutes a substantial step in a course of conduct planned to culminate in performing an abortion.
- "(3) BORN ALIVE.—The term 'born alive' has the meaning given that term in section 8 of title 1, United States Code (commonly

known as the 'Born-Alive Infants Protection Act') ''

- Act').''.
 (b) Conforming Amendments.—
- (1) The table of sections for chapter 74 of title 18, United States Code, is amended by adding at the end the following:
- "1532. Requirements pertaining to born-alive abortion survivors.".
- (2) The chapter heading for chapter 74 of title 18, United States Code, is amended by striking "PARTIAL-BIRTH ABORTIONS" and inserting "ABORTIONS".
- (3) The table of chapters for part I of title 18, United States Code, is amended by striking the item relating to chapter 74 and inserting the following:

This Act shall take effect one day after the date of enactment.

By Mr. DURBIN:

S. 205. A bill to promote minimum State requirements for the prevention and treatment of concussions caused by participation in school sports, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Mr. DURBIN. Madam President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 205

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Protecting Student Athletes from Concussions Act of 2023"

SEC. 2. MINIMUM STATE REQUIREMENTS.

- (a) MINIMUM REQUIREMENTS.—Each State that receives funds under the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6301 et seq.) and does not meet the requirements described in this section, as of the date of enactment of this Act, shall, not later than the last day of the fifth full fiscal year after the date of enactment of this Act (referred to in this Act as the "compliance deadline"), enact legislation or issue regulations establishing the following minimum requirements:
- (1) LOCAL EDUCATIONAL AGENCY CONCUSSION SAFETY AND MANAGEMENT PLAN.—Each local educational agency in the State, in consultation with members of the community in which such agency is located, shall develop and implement a standard plan for concussion safety and management that—
- (A) educates students, parents, and school personnel about concussions, through activities such as—
- (i) training school personnel, including coaches, teachers, athletic trainers, related services personnel, and school nurses, on concussion safety and management, including training on the prevention, recognition, and academic consequences of concussions and response to concussions; and
- (ii) using, maintaining, and disseminating to students and parents—
- (I) release forms and other appropriate forms for reporting and record keeping;
 - (II) treatment plans; and
- (III) prevention and post-injury observation and monitoring fact sheets about concussion;
- (B) encourages supports, where feasible, for a student recovering from a concussion (regardless of whether or not the concussion occurred during school-sponsored activities,